

9th Annual Massachusetts Suicide Prevention Conference



SUICIDE PREVENTION ACROSS THE LIFESPAN: A STRATEGIC APPROACH FOR YOUR COMMUNITY

MAY 18 & 19, 2010

9:00 am–4:30 pm (8:00 am registration)

The Best Western Royal Plaza, Marlborough, MA



SPONSORED BY:

**Massachusetts Department
of Public Health**

CO-SPONSORED BY:

Massachusetts Department of Mental Health
Massachusetts Coalition for Suicide Prevention
AdCare Educational Institute, Inc.

CONFERENCE OBJECTIVES

- *Participants will gain new information and increase their awareness of suicide as a public health issue*
- *Participants will become familiar with the goals and objectives of the Massachusetts Strategic Plan for Suicide Prevention*
- *Participants will learn how they can “take action” with the Massachusetts Coalition for Suicide Prevention to implement the Strategic Plan*
- *Participants will gain knowledge about the special needs of suicide survivors*
- *Participants will enhance their suicide assessment and intervention skills*

WHO SHOULD ATTEND?

Public health and mental health professionals, social workers, nurses, public safety officials, first responders, law enforcement officers, emergency medical technicians, corrections personnel, community leaders and advocates, survivors, counselors, clergy and faith community leaders, educators and school administrators, elder service staff, persons working with youth programs, GLBT advocates, providers of veterans' services and anyone interested in preventing self-harm and suicide in the Commonwealth of Massachusetts.

REGISTRATION

On-line registration is now available. Please go to www.adcare-educational.org to register and pay on-line. If you have questions regarding program registration contact: AdCare Educational Institute (508) 752-7313; (508) 754-0039/TTY. If the conference is cancelled due to inclement weather, a message will be recorded on AdCare Educational Institute's voicemail at (508) 752-7313 by 6:30 am on the day of the conference. Advance registration and payment are required.

CONTINUING EDUCATION

Continuing Education will be offered for Licensed Alcohol Drug Counselors (LADC I, LADCII, and LADC Assistants), Certified Alcohol and Drug Abuse Counselors (CAC/CADAC), Certified Addiction Specialists (CAS), Nurses (RN/LPN), Social Workers (SW) and Licensed Mental Health Counselors (LMHC). AdCare Educational Institute, Inc., is recognized by the National Board for Certified Counselors to offer continuing education for National Certified Counselors (NCC). We adhere to NBCC Continuing Education Guidelines. To ensure state credentials, contact your local board of certification. For Social Work CEs, contact AdCare Educational Institute to determine if an authorization number has been secured.

AdCare Educational Institute, Inc. is approved by the American Psychological Association to sponsor continuing education for psychologists. AdCare Educational Institute, Inc. maintains responsibility for the program and its content.

A SPECIAL NOTE ON CONFIDENTIALITY

Conference organizers recognize that presenters and attendees may share and hear information that in other settings would be considered private and confidential. Because of the broad public nature of this conference and the fact that print, broadcast and web media and other information disseminating outlets are likely to be in attendance, conference organizers are not able to guarantee any measure of confidentiality for presenters and attendees.

DIRECTIONS & OVERNIGHT ACCOMMODATIONS

BEST WESTERN ROYAL PLAZA

181 Boston Post Road West
Marlborough, MA
508-460-0700

From the Mass Pike (I-90): Take the Mass Pike to Route 495 – Exit 11A. Take Route 495 North to Exit 24B, which is Route 20 West. The hotel will be approximately one mile down the road on the right.

From Route 290: Take Route 290 to Route 495 South. Take Exit 24B (Route 20 West) off Route 495. The hotel will be approximately one mile down the road on the right.

A block of overnight rooms have been reserved at the Best Western Royal Plaza at a discounted rate of \$99.00.

Reduced rate hotel rooms will be held until April 27, 2010.

Hotel Reservations must be made directly with:

The Best Western Royal Plaza, 181 Boston Post Road West, Marlborough, MA 01752
508-460-0700 • 888-543-9500 • www.rplazahotels.com

8:00 Registration
9:00 Welcome and Opening Remarks

John Auerbach, Commissioner,
Massachusetts Department of Public Health

Barbara A. Leadholm, M.S., M.B.A., Commissioner,
Massachusetts Department of Mental Health

Keynote Speaker

Jerry Reed, Ph.D., MSW., Director, Suicide Prevention
Resource Center, Education Development Center, Inc.

Suicide Prevention: It Really Does Take A Community

This keynote will briefly trace the evolution of the suicide prevention movement in the U.S. from the passage of Congressional Resolutions in 1997 declaring suicide a national problem and calling for a national strategy to the current day when 48 states have a statewide suicide prevention strategy. Now, with thirteen years behind us, where have we traveled? where are we going? and what will it take to continue to move the field forward? The time has come to engage new partners, examine our successes and areas still needing improvement and to identify new resources and to find new and unexplored ways to institutionalize our efforts to ensure sustainability and reach those most in need.

10:15–11:45 Workshop Session 1 (A1–H1)
11:45–1:00 Luncheon
1:15–2:45 Workshop Session 2 (I1–Q1)
3:00–4:30 Workshop Session 3 (R1–X1)
4:30 Submit evaluations
Sign out for CEs

There will be a free optional **reception** sponsored by the MA Coalition for Suicide Prevention on Tuesday from 5:00–6:30 with hors d'oeuvres, music and a cash bar. All are welcome. Please check off appropriate box on registration form if you will be attending this reception.

8:00 Registration and Continental Breakfast
9:00 Welcome

The Face of Suicide

A panel of survivors (people who have lost a loved one to suicide) will share their experiences.

Moderated by Roberta Hurtig, Executive Director, Samaritans, Inc.

10:15–11:45 Workshop Session 1 (A2–G2)
11:45–1:00 Luncheon
1:15–2:45 Workshop Session 2 (H2–O2)
3:00–4:30 Workshop Session 3 (P2–T2)
4:30 Submit evaluations
Sign out for CEs

Note: For anyone feeling a need for support there will be Samaritan volunteers, available both days, who would be glad to talk with you. These volunteers will be wearing white ribbons.

REGISTRATION FORM

On-line registration is now available at www.adcare-educational.org

Deadline for Registration is **May 11, 2010**.

Advance registration and payment are required. Space is limited and will be filled on a first come, first-served basis.

We accept checks, money orders, and purchase orders. To pay by credit card, please register online at www.adcare-educational.org.

To register, please complete this form, indicating workshop selections, *include check payable to AdCare Educational Institute Inc., and mail to:*

AdCare Educational Institute, Inc.
5 Northampton Street, Worcester, MA 01605
Attn: Suicide Prevention Conference Registration

NAME _____

AGENCY _____

ADDRESS _____

CITY/STATE/ZIP _____

DAYTIME PHONE _____

FAX _____

(*REQUIRED) EMAIL _____

***Registration Confirmation will be e-mailed to you at the e-mail address listed above. Please print e-mail address clearly. (Registration will be confirmed by e-mail only)**

If you are applying for CEs, please indicate your professional affiliation

Continuing Education: _____

License #: _____

☐ LADC ☐ CAC/CADAC ☐ CAS ☐ RN/LPN

☐ NCC ☐ SW ☐ PSYCH

FEES:

Please indicate below which day(s) you wish to attend

May 18 only: Registration & CEs
☐ \$45.00

☐ **I will be attending the free optional reception.**

May 19 only: Registration & CEs
☐ \$45.00

Both Days: Registration & CEs
☐ \$75.00

Please indicate your workshop choices below:

Space is limited for each workshop and will be filled on first-come, first-served basis. Also indicate your second choice (Second choice workshops will be assigned if not indicated below).

TUESDAY, MAY 18, 2010 WORKSHOPS (DAY 1)

Session 1: 10:15–11:45 (A1–H1)

_____ FIRST CHOICE _____ SECOND CHOICE

Session 2: 1:15–2:45 (I1–Q1)

_____ FIRST CHOICE _____ SECOND CHOICE

Session 3: 3:00–4:30 (R1–X1)

_____ FIRST CHOICE _____ SECOND CHOICE

WEDNESDAY, MAY 19, 2010 WORKSHOPS (DAY 2)

Session 1: 10:15–11:45 (A2–G2)

_____ FIRST CHOICE _____ SECOND CHOICE

Session 2: 1:15–2:45 (H2–O2)

_____ FIRST CHOICE _____ SECOND CHOICE

Session 3: 3:00–4:30 (P2–T2)

_____ FIRST CHOICE _____ SECOND CHOICE

☐ **I would like a vegetarian meal for lunch.**

Access Accommodations:

If you are deaf or hard of hearing, or are a person with a disability who requires accommodation, please contact Laura Guida **by May 4, 2010** at (508) 752-7313 (phone), (508)-754-0039 (TTY) or email: Laura@adcare-educational.org.



WORKSHOPS

Please be aware that some workshops are 3 hours long and will continue into the next session.

All 3 hour sessions beginning in the afternoon (1:15–2:45 pm) will continue into session three (3:00–4:30 pm).

DAY 1 • MAY 18

choose one from each session

SESSION ONE (10:15–11:45) (A1–H1)

A1. THE ROLE OF DIALECTICAL BEHAVIORAL THERAPY IN TREATMENT OF SUICIDAL PATIENTS (ADVANCED)

This workshop will provide a brief overview of the theory and practice of Dialectical Behavioral Therapy (DBT) as developed by Marsha Linehan and colleagues. It will define the relative roles of DBT and other treatments that may reduce the risk of suicide. The primary emphasis will be on clinical vignettes that illustrate a DBT approach to various common and challenging dilemmas that arise with suicidal patients with Borderline Personality Disorder. The workshop is suitable for experienced DBT clinicians, as well as for those less familiar with DBT.

Daniel L. Breslin, MD; Chief of Psychiatry, Tewksbury Hospital, Tewksbury, MA

B1. BEREAVEMENT AFTER SUICIDE

The suicide of a loved one can have a profound and sometimes devastating impact on those left behind, called suicide survivors. Bereavement after suicide may entail high levels of disorientation, guilt, regret, anger, and trauma. Survivors sometimes struggle with the social stigma often placed on suicide. Survivors may also be at risk for elevated rates of complicated grief and future suicidality themselves. All of this makes surviving the suicide of a loved one a potentially life-changing ordeal that requires a level of support that goes beyond traditional crisis support or grief counseling. This workshop will provide a focused overview of the impact of suicide on survivors, and the clinical and support responses that are needed after a suicide occurs. The workshop will include didactic presentation, group discussion, and case examples from the presenter's practice.

John R. Jordan, Ph.D., Private Practice, Founder & Director of the Family Loss Project

C1. DUAL INTENT: MEN WHO KILL THEIR PARTNERS AND THEMSELVES

*The presenter will review research findings on the most common type of murder-suicide, those involving intimate partners. Murder/suicides comprise 30% of intimate partner homicides nationally, while familicides make up less than half of 1%. Dr. Adams will discuss unique factors of these kinds of killings, drawing from his profiles of five types of perpetrators as described in his recently published book, *Why Do They Kill? Men Who Murder Their Intimate Partners*. Recommendations for deterrence and intervention will also be discussed.*

David Adams, ED.D. Co-Director of Emerge, the first counseling program in the nation for men who abuse women, established in 1977.

D1. THAT'S SO GAY: PREVENTING AND ADDRESSING ANTI-GAY AND ALL FORMS OF BULLYING

"Kids will be kids." This was often the response to bullying in generations past. Yet recent studies indicate that bullying and harassment are escalating into dangerous situations for many young people. Almost 30% of youth in the United States (over 5.7 million) are estimated to be involved in bullying as either a bully, a target of bullying, or both. Unfortunately, most of us don't know how to respond when we witness bullying. Why do young people bully? Which kids are most often targeted and why? This workshop will help participants understand the impact of bullying and harassment among youth in schools, youth-serving agencies, and communities.

Marisa Howard-Karp, Program Director, The GLBT Youth Support Project, Out Health! The HIV/AIDS Service Coordination Collaborative

E1. CULTURAL COMPETENCY IN SUICIDE PREVENTION: SUICIDE BEHAVIOR AMONG LATINO/A ADOLESCENTS

This presentation reports on the unique perspectives of Latino youth and families, community leaders, and health care providers that help to identify the barriers and pathways that interfere with and that ease access to services for Latino youth at risk for suicide. This research project aims to identify methods for facilitating culturally-competent assessment, treatment, and services for Latino youth and their families.

Yvonne Ruiz, Ph.D.; Cheryl Springer, Ph.D., Salem State College School of Social Work

F1. VETERANS, MILITARY PERSONNEL AND SUICIDE PREVENTION

This workshop will outline the recent trends of suicide in the military. It will present techniques and policies used in the past and present showing how the military has adjusted to the recent increase in suicide. Included in the workshop will be discussion on how to recognize the signs of suicide not only with military personnel but also returning veterans that would include National Guard and Reserve Soldiers. Finally there will be discussion about the military culture and how this will help remove the stigma of getting help.

John Rodolico, Ph.D., Clinical Psychologist McLean Hospital/Harvard Medical School

G1. MENTAL HEALTH BEYOND HIGH SCHOOL

Transitions can be difficult for anyone, especially for youth planning for life beyond high school. Add mental health issues into the picture, and this transition is made even more complex. This workshop will examine ways to engage students in discussion around mental health awareness beyond high school, with focus on how to get help for themselves or a friend who may be in need. Participants will view an educational video that includes individuals sharing their true stories of how they struggled with depression and suicide beyond high school and what it took to get help.

Candice Porter, MSW, LICSW, Youth Programs Manager, Screening for Mental Health

H1. ADVANCING SUICIDE PREVENTION IN MASSACHUSETTS—HOW THE MA STRATEGIC PLAN FOR SUICIDE PREVENTION CAN HELP YOUR WORK

This interactive workshop will address how individuals and organizations can advance suicide prevention through the framework and tools of the Massachusetts Strategic Plan for Suicide Prevention (State Plan). We will discuss the State Plan and engage in activities to explore how participants' work relates to the Plan and its objectives. This workshop is for program managers and staff, prevention specialists, survivors, clinicians, and anyone interested in suicide prevention in Massachusetts.

Ellen Connorton, ScD, M.S.W, M.P.A

SESSION TWO (1:15–2:45) (I1–Q1)

*****This is a 3 hour session and will continue into Session 3*****

I1. FRAMEWORKS/CONNECT POSTVENTION TRAINING WORKSHOP

This 3 hour workshop is being presented by members of the MCSP – Northeast Region. Participants will receive the training for the Frameworks/Connect Postvention Training and receive a certificate.

The Frameworks/Connect Suicide Prevention Project was developed by the National Alliance on Mental Illness in New Hampshire and is a nationally-designated Best Practice project. This program has been adapted for use in Massachusetts, uses a train-the-trainer model, provides training for suicide threats and attempts (Prevention) as well as training in the wake of a suicide death (Postvention) and involves protocols for various disciplines.

The goal of this Postvention workshop is to allow people within communities to become competent and confident to respond to suicide deaths across the lifespan by promoting healing and reducing risk of further suicide. The community-based approach uses early recognition and skill building to accomplish this. Module 1 allows participants to gain an awareness of the impact of suicide and risk of contagion on survivors and communities. Module 2 helps people understand the grief that results from a suicide death and learn ways to enhance coping skills. Module 3 identifies discipline-specific protocols and Best Practices for communities after a suicide death. Module 4 is a review of warnings signs for promoting postvention as prevention for individuals at risk.

Deborah Helms, Program Coordinator; Samaritans; Mary Quinn., Samaritans; Larry Berkowitz, Ed.D. Director- Riverside Trauma Center

J1. THE IMPACT OF SUICIDE CALLS FOR RESPONDING POLICE OFFICERS: STRATEGIES TO LIMIT CRITICAL INCIDENT STRESS AND PREVENT POTENTIAL POLICE OFFICER SUICIDES

Police are typically on-scene after completed suicides. Although much has been written about work-related stressors encountered by police officers, little is known about the emotional impact of completed suicide calls on responding officers. Qualitative data was collected in a pilot study with 200 police officers across Massachusetts who provided confidential responses to a brief survey asking them to describe the most challenging aspects of dealing with suicides. Findings indicate that suicide calls can present personal and professional challenges for responding officers, which in turn can have short- and long-term impact for themselves, their departments, and their communities. This workshop will highlight: (1) the value of department-wide training in on-scene suicide response preparedness and protocols for all stakeholders; (2) the importance of providing follow-up services to address the potential impact on the officer(s); and (3) the significance of maintaining vigilance within police departments for preventing police suicide.

Barry N. Feldman, Ph.D., Director of Psychiatry Services in Public Safety, Assistant Professor, Department of Psychiatry, University of Massachusetts Medical School

K1. COMMUNITY COALITIONS: GETTING THE WORK DONE

This workshop will begin with an overview of what community coalitions are doing in suicide prevention throughout the country. We'll hear from the leader of a community coalition in MA and discuss the range of potential suicide prevention activities for community coalitions, informed by the MA Strategic Plan.

Effie Malley, Suicide Prevention Resource Center, Education Development Center
Jenny Garneau, Nantucket Coalition for Suicide Prevention

L1. PARENTS' RESPONSE KEY TO HEALTH OF GAY YOUTH

The way in which parents or guardians respond to a youth's sexual orientation profoundly influences the child's mental health and risk-taking behaviors including suicide. Learn about the startling and significant new research by Dr. Caitlin Ryan, director of San Francisco State University's Family Acceptance Project and hear from parents who have a GLBT child. Parents have a dramatic impact on the health and well-being of their GLBT loved ones. Learn how to share this information with the parents and clients with whom you work - research shows that even small changes in behavior make a huge difference!

Pam Garramone, Executive Director, Greater Boston PFLAG

M1. GOT NETWORKS?: THE ROLE OF CONNECTEDNESS IN SUICIDE PREVENTION

How is connectedness related to suicide? Why is understanding connectedness important? Relationships are more than important, they can be life saving. This interactive workshop will explore the role of connectedness in suicide prevention, both positive and negative, and how this concept impacts all of us, especially populations at higher risk for suicide. We will explore what connectedness looks like in your community and how it can be enhanced.

Alison T. Brill, MPH, Community Suicide Prevention Coordinator, MA Department of Public Health; Hutson W. Inniss, Vice President, Community and Organizational Development for Tapestry Health, Inc.

N1. DYING TO "SAVE FACE"—SUICIDE AMONG ASIAN AMERICANS

This workshop will focus on the high rates of suicide among Asian Americans, with an emphasis on transitional age youth. Traditional views of mental illness and suicide across Asian cultures will be discussed, as well as cultural competence and other strategies to combat the pervasive stigma toward mental illness in these communities.

Frances K. Chow, Student, UMass-Boston; Joy Connell, Massachusetts Department of Mental Health, Office of Multicultural Affairs

O1. DATA AND DRAMA: PERSPECTIVE ON AGING, MENTAL HEALTH AND SUICIDE

This two-part workshop will present:

Aging and Mental Health in Massachusetts: The State of the State (Part I)

An overview of what we currently know about elder mental health in the Commonwealth

Faith Little, MSW, Project Director, Office of Long Term Support Studies, University of Massachusetts Medical School

Followed by:

Talking with Dolores: (Part II)

A one act play about aging, life and death choices and saving room for dessert

Dee O'Connor, Playwright; Steve Henderson, Director, Dee O'Connor, Associate Professor and Director, Office of Long Term Support Studies, University of Massachusetts Medical School

P1. THE ROLE OF WELLNESS & NUTRITION IN SUICIDE PREVENTION

Suicidal ideation and suicide itself is often accompanied by mental health conditions such as depression and substance abuse, both of which are also independent risk factors for suicide. Depression and substance abuse are considered chronic diseases which involve the brain, yet not all of our efforts to treat these conditions incorporate what we know about the brain aspect of the disease. Meanwhile there is a significant literature on elements of wellness and nutrition that holds promise for addressing mental health issues that has gone virtually unnoticed by many mental health professionals and the general population. This workshop will focus on the role that omega 3's have on brain health and mental health and will engage participants in a discussion of ways to address wellness and nutrition in their current environment.

Barbara K. Reid, M.Ed., M.A., LMFT, Cambridge College & The Heller School of Social Policy, Brandeis University

Q1. NEW DEVELOPMENTS IN UNDERSTANDING AND TREATING NONSUICIDAL SELF-INJURY

One of the most challenging problems for clinicians and other professionals is dealing effectively with nonsuicidal self-injury. Of special concern is that self-injury has recently moved from clinical populations such as those served in hospitals and group homes to the general population including middle, high school and college students. This presentation will focus on understanding, managing and treating diverse forms of self-injury including arm and body cutting, self-inflicted burning, and excoriation of wounds. Self-injury will be distinguished from suicidal behavior in terms of a number of key characteristics. Levels of care in the management and treatment of self-injury will be reviewed, including:

- **The informal response** with emphasis on the strategic use of language and demeanor in responding initially to self-injury
- **Crisis intervention** with specific suggestions as to when self-injury may merit a hospital level of care
- **Replacement skills training** with an emphasis on self-soothing skills such as mindful breathing and visualization
- **Cognitive-behavioral treatment** targeting the automatic thoughts and core beliefs that support self-injury

Very practical suggestions in dealing with self-injury will be provided including a protocol for responding in school settings. The topic of self-injury contagion will also be addressed with guidelines for preventing and managing this problem.

Barent Walsh, Ph.D., author, *Treating Self-Injury: A Practical Guide*, Executive Director of The Bridge of Central Massachusetts in Worcester, MA

SESSION THREE (3:00–4:30) (R1–X1)

*****This workshop is continued from Session 2*****

I1. FRAMEWORKS/CONNECT POSTVENTION TRAINING WORKSHOP

R1. ACT TO PREVENT SELF-INJURY

Data from the 2007 Massachusetts Youth Risk Behavior Survey found that nearly one in five students (19%) indicated that they had hurt themselves on purpose at least once in the past year (i.e. cutting, burning, or bruising themselves). Workshop participants will learn ways to identify, understand, and prevent non-suicidal self-injury in schools. Research will be reviewed to highlight preliminary evidence behind a universal high school self-injury prevention program. This session will promote ways to engage school staff and parents as partners in prevention, while increasing collaboration with community providers.

Candice Porter, MSW, LICSW, Youth Programs Manager, Screening for Mental Health

Barent Walsh, Ph.D., author, *Treating Self-Injury: A Practical Guide*, Executive Director of The Bridge of Central Massachusetts in Worcester, MA

S1. ASSESSMENT OF SUICIDE RISK: PRACTICAL SKILLS DEVELOPMENT (ADVANCED)

This workshop is designed to help individuals learn and improve skills related to suicide risk assessment. Through a series of case vignettes and mock patient interviews, participants will be able to improve upon interview techniques that go beyond simple inquiry of suicidal ideation and intent. The workshop will also focus, using the case vignettes, on the conceptualization of suicide risk assessment and risk reduction strategies.

Debra Pinals, M.D., Assistant Commissioner for Forensic Mental Health Services

T1. SUICIDE PREVENTION 101 (BASIC)

Why does someone take their own life? Can it be prevented? This program will discuss the Risk Factors and Warning Signs that are typical of a person who may be feeling suicidal. But understanding this is not enough. We must also understand that suicide can be prevented. With this in mind, we will look at two different ways to prevent suicide: 1) By discussing what resiliencies are and how we can take care of ourselves when we are down; and 2) We will learn some techniques of listening which can be a powerful tool when helping a friend or someone we love.

Kelley Cunningham, Manager, Community Education & Outreach, Samaritans, Inc.; Patricia O'Flynn, Senior Outreach Coordinator, Samaritans, Inc.

U1. ETHICS AND SUICIDE PREVENTION: A LOOK ACROSS THE LIFESPAN

The issues of suicidality may vary for different age cohorts and cultures. It is critical for clinicians to recognize that their own values and level of acceptance and response to suicidal thought and behaviors may differ—sometimes quite drastically—from that of their clients and families. Clinician's response and service to clients must be provided in a competent manner, with recognition of the strengths and needs of clients in varying age groups.

Through dialogue and discussion, this workshop will explore how personal values impact the ethics of professional practice in the field of suicide prevention and our ability to discuss suicide in a value-neutral manner. Throughout the discussions, participants will be asked to reflect on how their values impact their work and ultimately our ability to make ethical decisions.

Ann Duckless, MA, CPS, Presenter, National Alliance on Mental Health Illness (NAMI)

V1. CHOOSING BEST PRACTICES FOR YOUR COALITION ACTIVITIES

Coalitions that have decided on their objectives and target populations may be wondering what to do next. Not only do we want to “do no harm” but we also want to select effective interventions. Becoming familiar with evidence-based and best practices in the field of suicide prevention is the next step. The Best Practices Registry for Suicide Prevention (BPR) is a widely recognized source of information about suicide prevention programs and practices.

Philip Rodgers, Ph.D., Evaluation Scientist, American Foundation for Suicide Prevention, SPRC/AFSP Best Practices Registry for Suicide Prevention; Effie Malley, Suicide Prevention Resource Center

W1. MENDING THE SOUL

The purpose of this training is to participate in a dialogue with African American and Haitian faith leaders who provide faith, hope and love to suicidal individuals who are typically struggling with a mental health problem like depression and hopelessness.

Workshop Overview:

- **Barriers** to mental health care access in **African American, Catholic and Haitian** populations.
- **Importance** of responding to suicide attempts and the need for culturally competent suicide prevention.
- **The need** to dismantle stigma that is associated with mental illness and depression.

Samuel Louis, M.P.H., MA Department of Public Health Office of Health Equity, Haitian Faith Leader & Expert Panelist;
Reverend Lynda Jordan, M.S., Ph.D., M.Div., M.P.H., African American ordained minister & Expert Panelist;
Father David Convertino, OFM, MSW, Guardian and Executive Director, St. Anthony Shrine and Ministry Center;
Father Paul LoStritto, OFM, RN, Director of Franciscan Food Center, St. Anthony Shrine and Ministry Center;
Lurena Lee, Program Coordinator II, MA Department of Public Health, Division of Violence and Injury Prevention (Moderator)

X1. AFRICAN AMERICAN MEN AND SUICIDE: RISKS AND BARRIERS TO PREVENTION

Senator Bill Owens (Retired)

DAY 2 • MAY 19

choose one from each session

SESSION ONE (10:15–11:45) (A2–G2)

A2. RISK MANAGEMENT FOR SUICIDE: WHAT CLINICIANS SHOULD KNOW (ADVANCED)

For most clinicians, not many events are as distressing as a client's suicide. This distress can be further compounded by the increasing number of malpractice actions occurring against those who provided the mental health treatment. In this workshop, Dr. Feldman will present current, evidence-based information considered to be essential for clinicians for avoiding claims of suicidal malpractice. Participants will learn about the magnitude of the problem and its implications, the standard of care in conjunction with suicide liability, and practical principles of risk management to assist in reducing the risk of liability should a suicide take place. The workshop will include case examples and be interactive.

Barry N. Feldman, Ph.D., Director of Psychiatry Services in Public Safety, Assistant Professor, Department of Psychiatry, University of Massachusetts Medical School

B2. FROM A MIND AT WAR TO A MIND AT PEACE

S.A.V.E. (Statewide Advocacy for Veterans' Empowerment) utilizes a presentation titled From a Mind at War to a Mind at Peace to educate providers and first responders on the difficulties veterans face while deployed and as they transition home. The training also focuses on the resources and services available to veterans following their service. S.A.V.E. team members share their personal military and reintegration experiences to provide the audience with an intimate understanding of returning veterans.

James Crosby, S.A.V.E., Department of Veteran Services; Kevin Lambert, S.A.V.E., Department of Veteran Services

C2. SUICIDE 101—EVERYTHING YOU WANT TO KNOW ABOUT SUICIDE BUT WERE AFRAID TO ASK (BASIC)

The Samaritans of Merrimack Valley will present a workshop on the basics of suicide. The workshop is intended to provide a foundation of knowledge when talking about suicide. We will cover suicide terminology, the prevalence of suicide, truths about suicide, risk and protective factors, warnings signs, how to talk with someone who may be at risk of suicide, and the resources available to provide the appropriate care for people at risk.

Workshop participants will receive handouts in this workshop, including a copy of the power point, statistical information, resource information, suggested reading material and more.

Deborah Helms, Program Coordinator; Mary Quinn; Bob Laprel, Samaritans of Merrimack Valley

D2. COMING AROUND FULL CIRCLE: FROM SUICIDE TO BULLYING PREVENTION

As a parent of a child who died in 1993, Dr. D'Antona will chronicle her own journey and discuss 4 major points regarding prevention: bullying can happen to anyone; there is a link between suicide and bullying; bystanders are the key to bullying prevention; we have made great strides in bullying prevention—and we have more work to do!

Robin D' Antona, Ed.D.

E2. WHY IT'S TIME TO START TALKING ABOUT FIREARMS (EVEN IN MASSACHUSETTS!) AND HOW TO BEGIN

Reducing a suicidal person's access to more lethal methods of suicide can help prevent deadly outcomes. This workshop summarizes the research in this area and its applicability even in a state in which suffocation is the leading suicide method. The workshop provides a series of practical, non-controversial steps to help families and providers reduce a suicidal person's access to guns at home and outlines a quick logic model to help suicide prevention advocates implement those steps systematically throughout a community or state.

Catherine Barber, Harvard Injury Control Research Center, Cambridge, MA

F2. HOW NOT TO KEEP A SECRET: A SCHOOL BASED PROGRAM FOR TEENS

Learn about this dynamic, interactive training program for peer leaders focused on teen depression awareness and suicide prevention. The program is research based and the training manual has recently been updated with new content and format.

At the conclusion of this program attendees will be able to:

- 1. State the benefits of implementing "How Not To Keep A Secret" for peer leaders, faculty advisors and overall school community.*
- 2. Understand the importance of collaborating with partner schools to sponsor a training day*
- 3. Outline the steps needed to implement this program in other communities.*

Barbara J. Green, Ph.D., Medical Director, Youth Health Connection, South Shore Hospital; Kim Noble, R.N., B.S., M.B.A., Program Director, Youth Health Connection, South Shore Hospital; Tammy Rundle, B.A., M.A., Director of Guidance, Scituate Public Schools, Scituate, MA; Bob Anthony, Adolescents Wellness, Inc.

G2. CULTURAL RELIGIOUS UNDERSTANDINGS OF SUICIDE

This workshop will examine how various ethnic and religious groups understand death in general, and suicide in particular. Implications for working with grief issues of survivors, especially those from non-dominant ethnic groups and religions, will be examined. Participants will be encouraged to contribute successes and challenges working with these issues.

Paul Thayer, Associate Professor of Education and Child Life, Chair, Department of Child Life and Family Studies, Wheelock College, Boston, MA

SESSION TWO (1:15-2:45) (H2-O2)

*****This is a 3 hour session and will continue into Session 3*****

H2. BUILDING EMOTIONAL RESILIENCE

Every individual has their own way of responding to stress and stressful situations. Anyone can develop healthy emotional resilience techniques to assist them in their day to day activities at home and work. By learning to access and practice positive skills, characteristics and habits when dealing with the stress of our daily lives, we will be better prepared for more challenging times. Paying attention to your behavioral health is essential in maintaining your overall health. It will help you to be better prepared to care for yourself, assist your peers, and those whose care you may be responsible for during a crisis or disaster.

Lisa Gurland, R.N., Psy.D., Director of Behavioral Health Planning Development, Massachusetts Department of Public Health

I2. THE PHENOMENON OF SUICIDE CONTAGION

A brief presentation of information, data, and theories about the phenomenon of suicide contagion followed by a conversation among the audience and presenters of how exposure to suicide appears to increase risk. We will also explore how these concepts inform intervention and treatment.

Larry Berkowitz Ed.D., Director, Riverside Trauma Center; Robert Macy, PhD, Director, Psychosocial Initiatives, The Trauma Center-JRI and Directory of Training, Riverside Trauma Center; Jim McCauley LICSW

J2. HOW WE CAN SUPPORT SURVIVORS OF SUICIDE: A WORKSHOP FOR PEOPLE IN THE COMMUNITY

A panel of survivors will talk about their experiences with first responders, clergy, coworkers, friends and therapists. Each panel member will share a story where a friend or professional was helpful to them as they faced their loss and/or a situation that was not helpful, causing more feelings of isolation and pain. It will give the audience the opportunity to learn new tools to support survivors in the community and open their eyes to new ways to be available and comforting.

Roberta Hurtig, Executive Director, Samaritans, Inc.; Kim Kates, Samaritans, Inc.

K2. IN OUR OWN VOICE: LIVING WITH MENTAL ILLNESS

This presentation given by trained people with mental illness about their experiences. The talk includes a video, personal testimony, and discussion with the audience. The speech is designed to enrich the audience's understanding of how people with serious psychiatric disorders cope with their illnesses while recovering and reclaiming productive lives.

Brooke Katz, In Our Own Voice; Liza Halpern, In Our Own Voice

L2. THE FRAMINGHAM JAIL DIVERSION PROGRAM: COLLABORATION BETWEEN POLICE AND MENTAL HEALTH CLINICIANS

This workshop will describe the development and operations of a pre-arrest co-responder Jail Diversion Program in Framingham, MA.

Framingham Police Deputy Chief Craig Davis and JDP Program Director Sarah Abbott

M2. CROSSING THE T's: INCLUDING TRANSGENDER CLIENTS IN EXISTING SUICIDE PREVENTION SERVICES

Transgender people have been identified as a priority population for suicide prevention efforts. Come learn what you and your organization can do to fine tune existing services to include transgender clients, and get in contact with others around the state to increase your capacity in this area. Participants will learn basic information specific to suicidality in the transgender population, and gain skills and resources to improve services for transgender clients and create a welcoming environment.

Thomas Lewis, LGBT Health Consultant; candidate, MA in Clinical Mental Health Counseling, Lesley University; Gunner Scott, Executive Director, Massachusetts Transgender Political Coalition

N2. ELDER COMMUNITY CARE: COMPREHENSIVE COMMUNITY-BASED MENTAL HEALTH SERVICES

This 90 Minute workshop will provide a history of Elder Community Care, including: Key Projects; Milestones; Current Initiatives; Lessons Learned; and the potential for replication of the model in other communities. Case examples will illustrate our commitment to decrease stigma and improve community awareness and access to services using gatekeeper training; provide seamless referral between agencies using a multidisciplinary collaborative team; deliver in-home therapy using mobile clinicians; connect with elders by twice weekly telephone contact using trained elder peer volunteer befrienders; and reduce suicide risk by carefully coordinating these comprehensive services. Ample time will be given to allow for discussion; especially surrounding replication in other communities.

Sarah Trongone, MSW, LICSW; Lynn Kerner, MSW, LICSW, Advocates, Inc.; Stephen E. Corso, MSW, LICSW; Heather Lacasse, MSW, LCSW, BayPath Elder Services, Inc.; Eileen Davis, Samaritans, Inc.

O2. SUICIDAL BEHAVIORS IN BORDERLINE PERSONALITY DISORDER: UNDERSTANDING, ASSESSMENT, AND TREATMENT (ADVANCED)

The workshop will describe various suicidal behaviors in BPD patients. It will review relevant literature and present formulations of various suicidal dynamics in BPD. Empirically-supported treatments for suicidal behaviors in BPD will be described. Guidelines for assessment and principles of interventions will be presented. Multiple clinical examples will be used to illustrate understanding, assessment, and intervention for suicidality in BPD.

Igor Weinberg, Ph.D., Assistant Psychologist, McLean Hospital, Harvard Medical School

SESSION THREE (3:00–4:30) (P2–T2)

*****This workshop is continued from Session 2*****

H2. BUILDING EMOTIONAL RESILIENCE

P2. WHAT EVERY THERAPIST NEEDS TO KNOW ABOUT WORKING WITH MEN

In the past decade, much has changed in our understanding of men at midlife. This presentation will focus on the psychological challenges and vulnerabilities of middle-aged men and their caregivers, with accompanying public policy implications. We'll look at issues of intimacy and autonomy in men's lives and how they shape the counseling and therapy experience for mental health professionals, both male and female. We will pay particular attention to middle-aged men's struggles with shame, anger, and love and consider how these feelings shape men's experience of counseling, along with their clinical and policy implications.

Sam Osherson, PhD., Private practice, Cambridge, Professor of Psychology, Fielding Graduate University
Author of Finding Our Fathers

Q2. SUICIDE-RELATED BEHAVIOR AMONG MALTREATED YOUTH INVOLVED WITH CHILD PROTECTIVE SERVICES: RESULTS FROM A NATIONAL STUDY

Child maltreatment and suicide-related behavior (SRB) are important public health problems insufficiently studied in the population involved with child protective services (CPS). This session will discuss 1) the link between child maltreatment and suicide-related behavior across the life course and 2) results from a specific study describing the effects of maltreatment type(s), severity, and frequency on the risk of SRB up to seven years post-baseline, among a nationally representative sample of CPS-involved children. Implications and group discussion to follow.

Deborah Stone, ScD, MSW, MPH, Consultant, Suicide Prevention Program, Massachusetts Department of Public Health; Susan Tucke, MSW, Foster Care Manager, Department of Children and Families

R2. REDEFINING COMMUNITY: HARNESSING THE POTENTIAL OF NEW MEDIA FOR SUICIDE PREVENTION, INTERVENTION AND POSTVENTION

The Internet and newer technologies have redefined our thinking about what comprises a “community.” Cell phones, email, online social networking sites, interactive websites and other technologies have drastically changed the ecology of communication and have created new community systems in which suicide prevention advocates and programs need to participate to be effective. The ability to communicate and rapidly share information globally offers the potential for increasing protective and risk factors. With eight of 10 internet users reporting they seek health information on line (Pew Internet and American Life Project), new media expands avenues for mental health promotion, suicide prevention, intervention and postvention efforts. Positive and negative examples of suicide prevention, intervention, and postvention are provided, including the implications of user generated content, and creation of online communities and opportunities for people at risk, as well as for families and survivors to receive information and supports following a suicide death. The workshop will discuss the positive and negative aspects of new media and how critical it is for organizations to be aware of these cultural shifts and develop the knowledge, comfort and technical skills needed to develop and implement new media strategies in their communities and organizations. Time will be allotted for questions and answers and audience discussion.

Kenneth Norton, LICSW, Suicide Prevention Director, NAMI, NH

S2. CONNECTING THE DOTS: DOMESTIC VIOLENCE AND SUICIDE

In this 90 minute workshop, the connection between suicidal behavior/acts and domestic violence will be drawn through common elements of both. The presence of limited options, the prevalence of depression, PTSD, use/abuse of substances, social isolation, and loss will inform this connection. The stressful life of a survivor of domestic violence is the most compelling evidence, so case examples will be provided.

Lisa Hartwick, LICSW, Director, The Center for Violence Prevention and Recovery, Beth Israel Deaconess Medical Center

T2. ALTERNATIVES TO SUICIDE: PEER-RUN SUPPORT GROUPS FOR ATTEMPT SURVIVORS

This workshop will discuss the Western Massachusetts Recovery Learning Community's (RLC's) development of peer-run groups for suicide attempt survivors called “Alternatives to Suicide” Support Groups. The facilitators of these groups also have lived experience with suicide attempts and/or suicidal thoughts. The premise of the groups is that empathic talking about suicide coupled with an exploration of alternative coping strategies will decrease suicide. Topics to be covered in this session will include what it means to be “peer-run,” how to handle difficult situations and the value of lived experience.

Oryx Cohen, M.P.A., Co-Director, Western Mass. Recovery Learning Community, The Consortium; Sera Davidow